

Depot Women's Club Request for Scholarship Application

Eligible high school seniors please complete this form and mail no later than January 20, 2006. You will receive the application packet within two weeks of receipt. **Please mail to Mrs. Heidi Castle, Scholarship Chair, 5149 Kylock Road, Mechanicsburg, PA 17055-4820**

PLEASE PRINT

Name: _____ Home Phone: _____

Address: _____ City: _____ Zip: _____

Email address (optional): _____

All applicants please include photocopy of both sides of your student I.D. card (required). Military dependents please include copy of both sides of military identification card.

High School: _____

Address: _____

Sponsor's Name: _____ Address: _____

Sponsor's Organization: _____

Address: _____ Phone: _____

Please list all of the schools to which you have applied:

I understand that any funds, which may be awarded for my benefit, will be for the sole purpose of furthering my education in an accredited college/university or vocational school/technical school of my choice. The funds will only be released by the Depot Women's Club Scholarship Award Fund in response to a bill on my account submitted by the school of my choice. The fund will be paid directly to the school on my account.

Applicant's Signature: _____ Date: _____

All information on your request for application will be treated in a strict confidential manner.